

**Application Data Sheet****Application Information**

<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	None
<b>Computer Readable Form (CRF)?::</b>	No
<b>Title::</b>	BENZOTHIAZOLE DERIVATIVE COMPOUNDS, COMPOSITIONS AND USES
<b>Attorney Docket Number::</b>	076333-0323
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	1
<b>Total Drawing Sheets::</b>	4
<b>Small Entity?::</b>	No
<b>Petition included?::</b>	No
<b>Secrecy Order in Parent Appl.?::</b>	No

**Applicant Information**

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	William E.
<b>Family Name::</b>	KLUNK
<b>City of Residence::</b>	Pittsburgh
<b>State or Province of Residence::</b>	PA
<b>Country of Residence::</b>	US
<b>Street of mailing address::</b>	1108 Onondago Street
<b>City of mailing address::</b>	Pittsburgh
<b>State or Province of mailing address::</b>	PA
<b>Postal or Zip Code of mailing address::</b>	15218

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US

**Status::** Full Capacity  
**Given Name::** Chester A.  
**Family Name::** MATHIS  
**Name Suffix::** Jr.  
**City of Residence::** Pittsburgh  
**State or Province of Residence::** PA  
**Country of Residence::** US  
**Street of mailing address::** 48 Fox Pointe Drive  
**City of mailing address::** Pittsburgh  
**State or Province of mailing address::** PA  
**Postal or Zip Code of mailing address::** 15238

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** China, Permanent U.S. Resident  
**Status::** Full Capacity  
**Given Name::** Yanming  
**Family Name::** WANG  
**City of Residence::** Imperial  
**State or Province of Residence::** PA  
**Country of Residence::** US  
**Street of mailing address::** 379 Birch Street  
**City of mailing address::** Imperial  
**State or Province of mailing address::** PA  
**Postal or Zip Code of mailing address::** 15126

**Correspondence Information**

**Correspondence Customer Number::** 22428  
**E-Mail address::** PTOMailWashington@FoleyLaw.com

**Representative Information**

<b>Representative Customer Number::</b>	22428	
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

**Assignee name::**

UNIVERSITY OF PITTSBURGH